



**State of Rhode Island
Office of the Secretary of State**

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Certificate Request Form

Request Information

ID	ENTITY NAME	CERTIFICATE TYPE
001749839	Sincere Multiservice Inc	Certificate of Good Standing

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: Sharlyn Martinezz

Business Name: Sin-cere Multiservice Inc

No. and Street: 596 Charles Street

City or Town: Providence

State: RI

Zip: 02904

Country: USA

Contact Phone: 4014289736 ext:

Contact Email: Sharlyn@sinceremultiservice.com